PTC/SB/81 (01-09) Approved for use through 11/30/2011. OMB 0861-0036 U.S. Patent and Tradomerk Office; U.S. DEPARTMENT OF COMMERCE and to a collection of information unless it displays a valid OMB control number. Under the Paparwork Reduction Act of 1995, no persons are required to 10/521,911-Conf. #1692 Application Number POWER OF ATTORNEY Filing Date September 19, 2005 First Named Inventor Stephen C. Bartlett REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY Title FLEXIBLE COUPLING AND Art Unit 3679 CHANGE OF CORRESPONDENCE ADDRESS Examiner Name G. J. Binda Attorney Docket No. 66967-0052 i hereby revoke all previous powers of attorney given in the above-identified application A Power of Attorney is submitted herewith. OR X | hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent 84362 and Trademark Office connected therewith: I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above and to transact all business in the United States Patent and Trademark Office connected the rewith: Registration Practitioner(s) Name Practitioner(s) Name Please recognize or change the correspondence address for the above-identified application to: x The address associated with the ebove-mentioned Customer Number: OR The address associated with Customer Number: Kristin L. Murphy Firm or Individual Name RADER, FISHMAN & GRAUER PLLC 39533 Woodward Avenue Suite 140 Bloomfield Hills Stete Zlp 48304 Country US Telephone (248) 594-0600 Email I em the: Apolicant/Inventor. OR Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on of Applicant prossignee of Record

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Malcola Harris Telephone × pm lles March 30, 2009 Signature Name Uwe Paksa Title and Company Authorized Signer, GKN Driveline International GmbH NOTE: Signatures of all the inventors or assigness of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*. \*Total of forms are submitted. POA or Authorization of Agent I hereby certify that this paper (along with any paper re system in accordance with § 1.5(a)(4). ciosed) is being transmitted via the Office electronic filing ferred to as belog attached or er Dated: 4/29/09 (Kristin L. Murphy)

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